

ANZA KOREA

COMMUNITY, NETWORKING, CHARITIES

SPECIAL EDITION

Mental Health Special Edition

October 2020

Q&A

Q. With a general mood of sadness and loneliness, how can we identify red flags for depression & when to seek help? How do you approach treatment for depression? What is the process, testing and number of sessions on average?

A. There is an unfortunate overuse and misuse of the notion of "positive" on social media and in pop psychology that leads to some rejection of our unpleasant emotions, which in reality have their own important survival value. **Being sad is part of the human experience, and understanding when, why, and how we are sad allows us to acknowledge the emotion, appreciate our humanness, as well as spur personal growth. This will facilitate our general emotional (and physical) health.**

That being said, chronic states of sadness and loneliness may be precursors to depression, which is typically characterised by the more intense feelings of despair and hopelessness. Profound sadness, consuming loneliness, and our poor reactions/coping to distress may accumulate without relief, leaving us feeling like things are unlikely to change, which



Couchology
your psychotherapy space
Jiaying Lim

We are very happy to introduce Jiaying to the ANZA community and we encourage anyone to reach out if you are feeling overwhelmed and or facing mental health challenges.

She is a licensed clinical (South Korea) and registered psychologist (Australia, Singapore) speaking Korean, English, Mandarin and based in Seoul. Having studied in Australia she understands the unique issues faced by ANZA members adjusting to life in a foreign country and in particular the challenges to mental health we are all facing due to COVID-19.

further demotivates action and allows a state of depression to take hold.

A diagnosis of depression generally requires at least two weeks of this persistent, intense state, in addition to resultant functional impairment, such as feelings of worthlessness contributing to some dereliction of duty (e.g., skipping classes, not showing up for work).

As all things tend to be, it is wiser to nip the situation in the bud to preempt escalation. **If you notice sadness and loneliness building up or lasting longer, this may be a good time to seek a professional opinion of what may be going on.** Intervention is case-

by-case as there isn't a one-size-fits-all, even if the diagnosis is labelled "depression." The underlying factors that predispose one to develop depression and those that trigger its onset are idiosyncratic, and require an evaluative intake for the mental health professional to figure out and put together these contributing pieces.

I am tentative in prescribing a number of sessions for intervention; this detail will backfire if a client isn't feeling any better by that point. If pressed, I remark that we will likely see some shifts in 6-8 sessions.

"Shifts", in this case, means some change in perception that reframes the relationship with the issue at hand, and not that the problem has been resolved or that the individual has been "cured".



Shifts provide some appreciable light at the end of the tunnel that offers hope and creates motivation to journey through the depression.

Q. In your opinion what are some cultural differences between Korean and the Australian/New Zealand approach to mental health care?

A. Self-awareness is a key element in personal growth and mental health care. Regardless of nationality, having openness toward a different frame of reference and being able to let go of the cause-effect expectation of 'fixing a problem' significantly broadens the scope to create cognitive shifts and reframe mindset.

In this regard, rather than nationality per se, it is relevant to consider the impact of culture. One such cultural piece is how face and image tend to be maintained within one's cultural group. **Face concerns prevent people from being open about their true vulnerabilities and a lack of admission, to self and another, hinders positive psychological health.** In addition, from both the perspectives of therapist and client within an intercultural therapeutic relationship, appreciating culture's influence on behaviour illuminates the attitudes and beliefs surrounding seeking psychological help and what might be the underlying contributing factors toward distress.

For instance, Korea ranks as one of the most uncertainty avoiding countries in the world, according to Dutch psychologist Hofstede who leads this field of study, meaning that in general, the



culture has an emotional need for certainty and adheres to rigid codes of belief and behaviour, even if these codes don't seem to work. For comparison's sake, Australia is intermediate on this cultural dimension, suggesting no strong preference in relation to uncertainty.

Q. We have seen a big focus on mental health as a result of Corona, can you give us some advice about coping mechanisms from an expat perspective? Can you suggest how we can help people dealing with the effects of corona?

A. One of the biggest impacts is weakened social support, in two areas. First, travel back home is highly limited, and not without time and cost sacrifices. When we can't see the light at the end of the tunnel, we may fall into helplessness and futility about where we are in life today, perhaps questioning our life choices that are keeping us away from loved ones. The other area of inadequate community falls within Korea; there are less

opportunities to organically form acquaintances or meet people, and social ties even within this geographical region may have dissolved due to social restrictions or the stress of this year.

Think of little ways to stay connected with people back home to reduce the physical and emotional distance you might be experiencing. Apart from the ubiquitous video chat, try something that doesn't require too much screen time. I recently had a **"shared experience"** where I raved about a novel in a group chat ("The Hundred-Year-Old Man Who Climbed Out the Window and Disappeared," if anyone needs a fun, lighthearted read) and a friend has also read it, so we ended up sharing our reactions and recommending the book to the group. **Another idea is to arrange a small token of care for family and friends, through a small business or social enterprise you support back home, to let them know how much they mean to you.**

Q. I am having a lot of problems connecting with people during this time, I find it overwhelming to be on zoom and worry that social media will have worse effects in the long term. How can I remain empathetic when there is such an overload of information and bombardment of technological stimulation?

A. There is science behind why virtual meetings and online socialising drain us so. **In-person exchanges offer a wealth of auxiliary communication cues that we subconsciously use to compute how to further the conversation.** There is a pop psychology/business myth, drawn from flawed deductions off a research paper, that communication is 93% nonverbal in nature. While that percentage is inaccurate as the real story is more complex, this erroneous thought does imply the tremendous impact of nonverbal cues in communication. And this information is absent when we are restricted to the small confines of a video conferencing screen. In addition, we can't help but self-monitor when we see ourselves on a screen. Our eyes dart to our image to check our hair, to ensure our smile isn't crooked. Zoom was my teaching tool even pre-pandemic and my eyes still fall prey to the little rectangle that is a mirror. Trying to fill in the blanks of missing nonverbal communication cues and absorbing additional self-information that is now available expends considerable mental and physical energy.

Passive consumption of online content also exacerbates our lethargy as scrolling through social media does little to encourage positive emotions, which allow us to broaden our

thinking and approach difficulties with resilience. This isn't simply about being "positive" or "happy." We have access to other positive emotions like awe and interest, and Barbara L. Fredrickson, the foremost scholar in this regard, argues that the lack of positive emotional experience diminishes our ability to socially connect and bond. Her research has found that **we need positive emotions to facilitate our ability to face and resolve problems, which in turn leads to personal growth and social development.**

Recognising that behavioural economists have engineered the game against us, and that humans will ultimately react primitively to physical stimuli, we can use this awareness to increase our intentionality with our online routine. Although it may be tricky to protect the boundary of our virtual space given current affairs, trying to limit online meeting time and structuring Zoom meetings to allow for mental and physical breather is one baby step forward.



These are common suggestions and still useful

- Cap social media time
- Create boundaries- take breaks
- Delete or deactivate apps to reduce the ease of access
- Be assertive- gently turning down offers to socialise online can further delineate work and life spaces.
- Retain Zoom as a work tool and offer other options to people who want to connect with you, so that we mentally associate Zoom solely with work, and by doing so, we create work-life balance in our headspace.

Once we regain recognition of and connection with a range of positive emotions, we will be less fatigued and more able to enjoy the fulfillment of connecting with others



Q. What are some of the issues you have seen among children in your practice during this time?

A. Most presenting issues haven't necessarily been due to the pandemic. Although the times and its events present as a trigger, what this year seems to have done is dredge up deeper difficulties that otherwise may be minimised, rationalised, swept under the rug, or avoided through distraction. Due to enforced physical distancing and restricted social activities, without the larger variety of usual options of escapism and avoidance, troubling issues and stresses are brought to the forefront and become more confronting.

Having said this, one group of children, adolescents actually, who have been deeply impacted by the pandemic is the cohort starting university. Teenagers who either entered university this year, or are working toward that for 2021, have had to adjust their expectations of this life stage. Starting college and exercising autonomy is a rite of passage, so the absence of the campus experience can be a setback for identity formation as some teens remain with family in Korea and attend classes online.

Q. There is a history of OCD in my family, and I worry that the current hyper vigilance over cleanliness might trigger my six year old child into unhealthy obsessive repetitive behaviour.

Do you have any suggestions on how to recognize when it is becoming problematic?

A. There is a fine line between caution and paranoia. We can consider the elements of an action's rationality as well as its impairment on daily living in order to make the distinction of whether there are obsessive compulsive behaviours of concern. Be it your own behaviour or your child's, first reflect over the thinking behind

the action. While exactly what is suitable concern over cleanliness might be tricky during this time, even knowing where vigilance stops and hypervigilance starts is a good step forward. **As we accept that this year has been accompanied by uncertainty, stress, and anxiety, we can normalise and empathise with our children's very human, very typical reactions to the pandemic.**

Next, make use of facts and science to explain what is going on. This creates the rationality for children to recognise linkages between events and their reactions. For example, too much attention to emergency updates, unfortunately, may reduce rationality as the focus is on the numbers without providing a clear context for how newly identified patients are becoming infected. This can create paranoia and hysteria in the best of us. Monitor the information that your child is exposed to and be at hand to provide honest, reasonable explanations if your child asks you what is going on.

A friend had difficulty answering her kid's questions early on this year and responded with, don't



worry, there will be a vaccine soon and things will be fine in a few months. However well-meaning the intentions, promising outcomes that we can't effect heightens anxiety, worry, and stress. With no end in sight and an unfulfilled promise, children may generate their own irrational solutions to (temporarily) relieve distress or (seemingly) prevent a catastrophic outcome like catching covid. For my friend, I suggested simply telling her son, "I don't know what will happen," and collaboratively seek credible information to learn together how to cope during the pandemic. The UNICEF COVID-19 portal offers excellent child-friendly content. One of their materials is public health guidelines that create a boundary for hygiene habits, which helps us to minimise the chance that our actions will intensify into something that impairs our daily routine.

Regarding hand-washing, for instance, UNICEF lists five pandemic-related recommendations. Going through the list with your child will help cultivate awareness of what defines vigilance versus hypervigilance over hand-washing, and facilitate an understanding of what is a reasonable practice. Finally, keeping in mind the power of vicarious learning, we should actively note and monitor our own reactions. Be mindful of what we say and how we react, and follow up our own lapses with a debrief by explaining, e.g., "I got overanxious because I touched that surface, I didn't have hand sanitiser, and hence overreacted." Supplement this admission by helping your child to build mastery and awareness: seek your child's counsel on an appropriate alternative reaction, and thank your child for helping you to manage your anxiety.



Collaboratively, families can grow a healthier and balanced appreciation of cleanliness and hygiene during this time.

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www.couchology.com

Useful resources

- www.beyondblue.org.com
- www.mentalhealth.org.nz
- www.smilingmind.com.au
- www.headspace.com
- <https://www.un.org/en/coronavirus/mental-health-and-wellbeing>

ANZA Korea Welcomes you!

Memberships

ANZA Korea welcomes all nationalities to come join our community.

Yearly membership is KRW50,000 and begins from 01 August.

Email us at registration@anzakorea.com

How to become a member in 3 steps

STEP 01 Head to our website
www.anzakorea.com
Click the "membership" link



STEP 02 Fill in your details
One membership (KRW50,000/year) covers one household

STEP 03 Transfer payment
ANZA Korea Bank Account Details
Bank: Standard Chartered (SC은행)
Account Number: 100-20-954772
Account Name: ANZA (주)한호주뉴질랜드협회

We also accept cash however, bank transfer is preferred. Unfortunately, credit card is not available as a payment option.

Join us at our next event!

For any questions please email registration@anzakorea.com

